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CONFIRMATION NO. 5922

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| SERIAL NUMBER 10/561,740 | FILING or 371(c) DATE 08/28/2006 RULE | CLASS 607 | GROUP ART UNIT 3766 | ATTORNEY DOCKET NO. MET095.233411 | | |
| APPLICANTS Ofer Glasberg, Haifa, ISRAEL; Tami Harel, Haifa, ISRAEL; ** CONTINUING DATA ***** This application is a 371 of PCT/IL04/00551 06/20/2004 which claims benefit of 60/489,208 07/22/2003 ABN and claims benefit of 60/488,964 07/21/2003 <div style="border: 1px solid black; padding: 2px; display: inline-block;">the correct provisional application is 60/480,208 BTG 2/22/2008</div> ** FOREIGN APPLICATIONS ***** none BTG 2/22/2008 ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/07/2006 | | | | | | |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/BRIAN T GEDEON/</u> Examiner's Signature | | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY ISRAEL | SHEETS DRAWINGS 3 | TOTAL CLAIMS 17 | INDEPENDENT CLAIMS 4 |
| ADDRESS WOLF, BLOCK, SHORR AND SOLIS-COHEN LLP 250 PARK AVENUE 10TH FLOOR NEW YORK, NY 10177 UNITED STATES | | | | | | |
| TITLE Hepatic device for treatment or glucose detection | | | | | | |
| FILING FEE RECEIVED 1290 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | | |